

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SH</i>		<i>04-19-01</i>
O.I.P.E. CLASSIFIER		<i>2.</i>	<i>5/10/01</i>
FORMALITY REVIEW	<i>A.T</i>	<i>1071</i>	<i>06/11/01</i>
RESPONSE FORMALITY REVIEW			

1207-2

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
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If more than 150 claims or 10 additional sheets are used, staple additional sheet here

BEST AVAILABLE COPY

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